Ontario

Inspection Report Under the
Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

Central East District
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Public Report

Report Issue Date: December 19, 2024

Inspection Number: 2024-1378-0005

Inspection Type:
Critical Incident
Follow up

Licensee: Axium Extendicare LTC II LP, by its general partners Extendicare LTC Managing II GP Inc. and Axium Extendicare LTC II GP Inc.

Long Term Care Home and City: Sherwood Court Long Term Care Centre, Maple

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): December 9-13, 16, 18, 19, 2024

The following intake(s) were inspected:

- Intake: #00124032/CIS#2894-000026-24- An intake related to alleged physical abuse
- Follow-up #: 1 - Compliance Order High Priority CO(HP) #001/ 2024_1378_0004, FLTCA, 2021 - s. 5, Home to be safe, secure environment, CDD November 15, 2024
- Follow-up #: 1 - Compliance Order High Priority CO(HP) #003/ 2024_1378_0004,O. Reg. 246/22 - s. 79 (1) 3., Dining and snack service, CDD November 15, 2024
- Follow-up #: 1 - Compliance Order High Priority CO(HP) #004/ 2024_1378_0004,O. Reg. 246/22 - s. 79 (1) 8., Dining and snack service, CDD November 15, 2024
- Follow-up #: 1 - Compliance Order High Priority CO(HP) #002/ 2024_1378_0004, FLTCA, 2021 - s. 24 (1), Duty to Protect, CDD November 15,

2024
- An Intake related to an injury of unknown cause.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1378-0004 related to FLTCA, 2021, s. 5
Order #003 from Inspection #2024-1378-0004 related to O. Reg. 246/22, s. 79 (1) 3.
Order #004 from Inspection #2024-1378-0004 related to O. Reg. 246/22, s. 79 (1) 8.
Order #002 from Inspection #2024-1378-0004 related to FLTCA, 2021, s. 24 (1)

The following **Inspection Protocols** were used during this inspection:

Food, Nutrition and Hydration
Infection Prevention and Control
Prevention of Abuse and Neglect
Pain Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Pain management

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 57 (1) 4.
Pain management
s. 57 (1) The pain management program must, at a minimum, provide for the following:
4. Monitoring of residents' responses to, and the effectiveness of, the pain management strategies.

The licensee has failed to monitor the effectiveness of a resident's pain. An incident of an injury with unknown origin occurred involving a resident. The resident reported pain to staff on a specified date and staff completed an initial assessment, however no indication of an evaluation of the resident's pain was completed. The resident's pain was reassessed on a specified date. The resident's injury was confirmed through specified evaluation.

Sources: Critical Incident Report (CIR), resident's clinical records, clinical evaluation tool, and interviews with staff.

WRITTEN NOTIFICATION: Administration of drugs

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 140 (2)

Administration of drugs

s. 140 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber. O. Reg. 246/22, s. 140 (2).

The licensee has failed to ensure drugs were administered to the resident as specified by the prescriber. A resident sustained an injury of unknown origin. Staff used a pain monitoring tool to evaluate the resident's pain, and on a specified date, it was recorded on a clinical tool that a specified medication was administered. According to the Medication Administration Record (MAR), there was no indication the resident had received the medication, placing them at risk for being involved in a medication incident.

Sources: CIR, clinical monitoring tool, and interview and Associate Director of Care (ADOC). [000774]